

Introduced by Senator Figueroa

December 2, 2002

An act to add Article 1.5 (commencing with Section 14045) and Article 1.6 (commencing with Section 14046) to Chapter 7 of Part 3 of Division 9 of the Welfare and Institutions Code, relating to health care.

LEGISLATIVE COUNSEL'S DIGEST

SB 24, as introduced, Figueroa. Health care: accelerated enrollment.

Existing law provides for creation of various programs to provide health care services to persons with limited incomes and who meet various eligibility requirements. These programs include the Healthy Families Program, administered by the Managed Risk Medical Insurance Board, and the Medi-Cal program, administered by the State Department of Health Services.

This bill would create the Cal-Health Program, which would provide coordination of the Healthy Families and Medi-Cal programs by the board and the department.

This bill would require the department, on or before January 1, 2005, to implement a seamless, coordinated health care program that would enable participating providers to screen and initiate an accelerated enrollment process for eligible individuals, as defined, into the Medi-Cal program or the Healthy Families Program upon receipt by the individual of medical services by a provider. It would require the department to exercise its option under federal law and submit the necessary federal waiver to allow providers to engage in this process.

This bill would require each county, on and after January 1, 2004, to process accelerated enrollment applications for services provided to children under the Medi-Cal program and the Healthy Families

Program. It would also require a Medi-Cal card to be issued for any child who meets specified eligibility requirements to enable the child to receive Medi-Cal services until the child is one year of age. By imposing new duties on counties, this bill would create a state-mandated local program.

The bill would provide for accelerated enrollment in either the Medi-Cal program or Healthy Families Program for all children and parents of a child under one year of age when the family income is at or below 250% of the federal poverty level. It would also provide, commencing January 1, 2006, for accelerated enrollment in these programs to all parents of children eligible to receive benefits under those programs, subject to the receipt of a federal waiver. By expanding eligibility for the Medi-Cal program, which is currently determined by counties, the bill would impose a state-mandated local program by expanding the scope of those duties.

This bill would, on or before January 1, 2006, require the department to complete a study to determine the feasibility of adding other groups of individuals to the accelerated enrollment process including, but not limited to, the aged, blind, or disabled.

The bill would be implemented only to the extent that funding for these provisions is received from specified sources.

The California Constitution requires the state to reimburse local agencies and school districts for certain costs mandated by the state. Statutory provisions establish procedures for making that reimbursement, including the creation of a State Mandates Claims Fund to pay the costs of mandates that do not exceed \$1,000,000 statewide and other procedures for claims whose statewide costs exceed \$1,000,000.

This bill would provide that, if the Commission on State Mandates determines that the bill contains costs mandated by the state, reimbursement for those costs shall be made pursuant to these statutory provisions.

Vote: majority. Appropriation: no. Fiscal committee: yes. State-mandated local program: yes.

The people of the State of California do enact as follows:

- 1 SECTION 1. Article 1.5 (commencing with Section 14045)
- 2 is added to Chapter 7 of Part 3 of Division 9 of the Welfare and
- 3 Institutions Code, to read:
- 4

Article 1.5. Cal-Health Program

14045. There is hereby created the California Health Care Program (Cal-Health) to coordinate the Medi-Cal program and the Healthy Families Program (Part 6.2 (commencing with Section 12693) of the Insurance Code) for the purpose of reducing administrative costs by simplifying and streamlining income and resource methodologies and other eligibility rules and application, enrollment, retention, and seamless bridging procedures between the two programs to ensure no disruption in coverage for eligible individuals, as provided in Sections 12694.3, 12694.5, and 12694.6 of the Insurance Code and to otherwise implement this section and Section 12694.11 of the Insurance Code. The duties and functions of Cal-Health shall be carried out by the State Department of Health Services, which is defined for the purposes of this article, as the “department,” and the Managed Risk Medical Insurance Board, which is defined for the purposes of this article, as the “board.” The coordinated Medi-Cal and Healthy Families programs established by this article shall be known as Cal-Health.

SEC. 2. Article 1.6 (commencing with Section 14046) is added to Chapter 7 of Part 3 of Division 9 of the Welfare and Institutions Code, to read:

Article 1.6. Accelerated Enrollment For Publicly Funded Health Care Programs

14046. (a) (1) On or before January 1, 2005, and subject to subdivision (b), the department shall implement a seamless, coordinated health care program that would enable participating providers to screen and initiate an accelerated enrollment process for eligible individuals into the Medi-Cal program or the Healthy Families Program (Part 6.2 (commencing with Section 12693) of the Insurance Code) upon the individual’s initial receipt of medical services by a provider.

(2) Accelerated enrollment shall continue until a final eligibility determination is made by the county required to make this determination for the respective programs.

(3) Notwithstanding any other provision of law, verification requirements shall be limited to those required by federal law.

(4) For purposes of this section, “individual” means children under 18 years of age and their parents.

(b) To the extent permitted by Section 1396r-1a of Title 42 of the United States Code and Section 457.355 of Title 42 of the Code of Federal Regulations, the state shall exercise its option to allow providers to temporarily enroll individuals who meet initial screening requirements into the Medi-Cal program and the Healthy Families Program pursuant to subdivision (a).

(c) On or before January 1, 2005, the State Department of Health Services shall submit a federal waiver under Section 1115 of the federal Social Security Act (42 U.S.C. Sec. 1315) or exercise other options available under federal law to permit providers to temporarily enroll individuals who meet initial screening requirements into the Medi-Cal program and the Healthy Families Program pursuant to subdivision (a).

14046.1. Commencing on and after January 1, 2004, each county shall process accelerated enrollment applications for services provided to children under the Medi-Cal program and the Healthy Families Program.

14046.2. (a) Notwithstanding any other provision of law, commencing January 1, 2004, a Medi-Cal card shall be issued for any child who has been deemed eligible to receive services under the Medi-Cal program until the child is one year of age. For purposes of this subdivision, a child has been “deemed eligible” when services have been requested for that child pursuant to the California Health and Disability Prevention Program (Article 6 (commencing with Section 124035) of Chapter 3 of Part 2 of Division 106 of the Health and Safety Code) and the mother or father of the child is currently enrolled in the Medi-Cal program.

(b) If the income of the family of a child under one year of age is at or below 250 percent of the federal poverty level, all children and parents in that family shall qualify for accelerated enrollment in either the Medi-Cal program or the Healthy Families Program. Accelerated enrollment shall continue until a final eligibility determination is made by the county required to make the determination for the respective programs.

14046.3. (a) (1) Subject to the receipt of a waiver pursuant to paragraph (2), parents of children eligible to receive benefits under the Medi-Cal program or the Healthy Families Program

1 shall also be eligible to participate in the accelerated enrollment
2 program established pursuant to Section 14046.

3 (2) The department shall submit a federal waiver under Section
4 1115 of the federal Social Security Act (42 U.S.C. Sec. 1315) to
5 permit the participation of parents in the accelerated enrollment
6 process under the Healthy Families Program.

7 (b) To the extent federal financial participation is available and
8 funding is available in the annual Budget Act or other statute, the
9 department shall, upon receipt of the federal waiver under Section
10 1115 of the Social Security Act (42 U.S.C. Sec. 1315), as specified
11 in Section 14005.41, disregard all income and assets for parents of
12 applicants and recipients eligible under the program adopted
13 pursuant to Section 1931(b) of the federal Social Security Act (42
14 U.S.C. Sec. 1396u-1).

15 (c) This section shall be operative on January 1, 2006.

16 14046.4. On or before January 1, 2006, the department shall
17 complete a study to determine the feasibility of adding other
18 groups of individuals to the accelerated enrollment process with
19 respect to Medi-Cal and Healthy Families services, including, but
20 not limited to, the aged, blind, or disabled.

21 14046.5. This article shall be implemented only to the extent
22 that funding for these provisions is received from federal funds for
23 the Healthy Families Program (Part 6.2 (commencing with
24 Section 12693) of the Insurance Code), the Medi-Cal program,
25 and the Child Health and Disability Prevention Program (Article
26 6 (commencing with Section 124035) of Chapter 3 of Part 2 of
27 Division 106 of the Health and Safety Code).

28 SEC. 3. Notwithstanding Section 17610 of the Government
29 Code, if the Commission on State Mandates determines that this
30 act contains costs mandated by the state, reimbursement to local
31 agencies and school districts for those costs shall be made pursuant
32 to Part 7 (commencing with Section 17500) of Division 4 of Title
33 2 of the Government Code. If the statewide cost of the claim for
34 reimbursement does not exceed one million dollars (\$1,000,000),
35 reimbursement shall be made from the State Mandates Claims
36 Fund.

